

FOR OFFICE USE ONLY

Receipt Date _____

Payment Amt \$ _____

License # _____

Expiration Date _____

**RENTAL HOUSING LICENSE APPLICATION***City of Westminster**56 W. Main St**Westminster, MD 21157**P: 410-848-9000 F: 410-857-7476*

THE FOLLOWING MUST BE RETURNED TOGETHER FOR AN APPLICATION TO BE CONSIDERED COMPLETE: (1) An Application with all information printed, typed, checked or circled as appropriate. (2) Applicable lead inspection certificate(s) for each unit. (3) Check payable to "City of Westminster" in the amount of rental license fee(s) due. Signatures must be original. Incomplete, unpaid or unsigned Application forms will be returned and the unit(s) will not be issued a license.

FEES: (Make checks payable to "City of Westminster" and mail to above address)

The Rental License Fee is \$20 per unit if paid prior to July 1st; \$30 per unit if paid prior to August 1st; \$50 per unit if paid prior to September 1st. **Rental License fees paid after September 1st include higher fees.** Contact the City of Westminster for further information. The amount of the Rental License Fee depends on the date the Application is received by the City of Westminster Rental Housing Licensing Program. There is no charge for making changes in information on an existing License.

Type of Application: (check all that apply)

☐ New ☐ Renewal Change in: ☐ Property Owner Information ☐ Property Agent Information
Section 1: RENTAL PROPERTY / DWELLING UNIT INFORMATION (No P.O. Boxes accepted)

Rental Property Address _____ Unit/Apt# _____ Zip Code _____

*If four (4) or more units/apartments at the same address, use continuation sheet. Reproduce continuation sheet as needed.

Property Tax Account No. 07 - _____

Name of subdivision/complex? _____ No. of Units/Apartments _____

Type of unit: ☐ Apartment ☐ Townhome ☐ Duplex ☐ Single Family ☐ Other _____ Year built _____City of Westminster Water/Sewer Account # _____ - _____ City Section 8 Housing? ☐ Y ☐ N**Section 2: PROPERTY OWNER INFORMATION**

Owner Name _____

Home Phone # _____ Cell Phone # _____ Work Phone # _____

Property Owner Address _____ City _____ State _____ Zip Code _____

Property Owner Mailing Address (if different from above) _____ Zip Code _____

E-Mail Address _____ Best Method to reach you: E-mail Phone

Section 3: PROPERTY AGENT INFORMATION

Westminster City Code requires that all owners of rental properties have a designated agent if the owner resides more than 50 miles from the Westminster City Limits. Agents must be available within an hour of notice and be available 24 hours a day.

Property Manager Name _____

Property Manager Address _____ City _____ State _____ Zip Code _____

Property Manager Home Phone # _____ Cell Phone # _____ Work Phone# _____

E-Mail Address: _____

Section 4: LEAD PAINT ABATEMENT CHECKLIST (Must be completed)

Maryland law requires all owners of rental properties to comply with State Lead Poisoning Prevention Requirements.

-All owners must provide the following information before a Rental Housing License Application is accepted to operate as a rental unit within the City of Westminster. Additional information regarding lead poisoning prevention and compliance can be obtained from the Maryland Department of Environment website at www.mde.state.md.us or by calling 410-537-4199 or 1-800-633-6101.

-Photocopies of inspection certificates must be mailed with this Rental Housing License Application for those units built before January 1, 1978.

1. Was the rental unit built prior to January 1, 1978? Y N Year of construction_____

*If you answered yes to question #1 then please answer the following questions 2 through 4

2. Is this unit registered with MDE? ☐ Y ☐ N MDE Tracking # _____

*If you answered no, contact MDE to complete the appropriate lead testing process for your unit.

3. Is your MDE registration current with MDE and all fees paid? ☐ Y ☐ N

*If no, please contact MDE for registration requirements.

4. Lead Certificate # for CURRENT tenant _____

Section 5: CERTIFICATIONS

Owners Certification:

I hereby certify and agree as follows: (1) that I am the owner or the duly authorized agent of the owner to make this application; (2) I have read all of the information set forth herein; (3) that the license, if issued, may be declared void should it be discovered that the information contained in the Application is false; (4) that I will comply with the City of Westminster Property Maintenance Code (City Code, Chapter 119), the Charter of the City of Westminster and all applicable provisions of the Code of the City of Westminster, all of which are applicable to the rental of my property. I also understand that if there are any changes in property ownership, owner address, or Property Agent or owner contact information that I must notify the City of Westminster within 10 days of the change. It is a violation of the City Code for any property owner to offer any unit for rent or to allow any rental unit to be occupied without first obtaining a Rental License. Failure to comply with the Rental Licensing requirements of the City Code constitutes a municipal infraction, subject to the fines and penalties set forth in the City Code.

CHECK ONE:

(a) _____ I agree and consent to inspections by the City Code Enforcement Inspector to determine whether the property is in compliance with the City Property Maintenance Code, the City Charter and applicable provisions of the City Code, if the City receives a complaint concerning the property, and that the City may make an appointment with me, my property agent, or a tenant for such purpose.

(b) _____ I request that the City obtain an administrative search warrant prior to entering my property for inspection purposes in connection with any rental license issued in connection with this application, unless a tenant has requested an inspection by a code enforcement official and given permission to said official to enter, in which case the code enforcement official may enter the premises without a warrant. This provision does not restrict or limit the right of a public official to enter without a warrant under exigent circumstances to prevent or abate an immediate threat to the public health, safety or welfare.

I affirm under the penalties of perjury that the above information is complete and is true to the best of my knowledge, information and belief.

Date: _____

Owner's Signature

OWNER, DID YOU REMEMBER TO:

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Sign the Application? |
| <input type="checkbox"/> | Designate a Property Agent in Maryland? |
| <input type="checkbox"/> | Enclose License Fee payable to "City of Westminster"? |
| <input type="checkbox"/> | Enclose photocopy of Lead Inspection Certificate? |